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DEC 0 9 2004 PER TRADEMENT

PATENT Docket No. 20061/OF03P197

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants:) Title: "Methods of Manufacturing a) Semiconductor Device"
Jung et al.))
Serial No: 10/722,312) Group Art Unit: 2812
Filed: November 25, 2003) Examiner: Lynne Ann Gurley)

AMENDMENT TRANSMITTAL WITH PETITION FOR EXTENSION OF TIME

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith is a response to the Office action pending in the above application.

CERTIFICATE OF MAILING (37 CFR 1.8)

I hereby certify that this paper and the documents referred to as enclosed therewith are being deposited with the United States Postal Service as first class mail, postage prepaid, on **December 6, 2004** in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

James A Flight

12/10/2004 ZJUHAR1 00000008 10722312

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110.00 OP

1.	Small	Entity	Status
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	Verified statement(s) claiming small entity status is(are) attached
	Small entity status has been established and is still effective.
\boxtimes	Has not been established.

2. Extension of Time

This is a petition for an extension of time under 37 CFR 1.136 for the total number of months checked below:

EXTENSION (Months)	FEE FOR LARGE ENTITY		FEE FOR SMALL ENTITY		
One Month	X	\$110.00	\$55.00		
Two Months		\$430.00	\$215.00		
Three Months		\$980.00	\$490.00		
Four Months		\$1,530.00	\$765.00		
Fifth Month		\$2,080.00	\$1,040.00		

If an additional Extension of Time is required, please consider this a petition therefor.

An extension for month(s) has already been secured and the fee paid therefor of \$ is deducted from the total fee due for the total months of extension now requested.

Deduction: \$

Extension Fee: \$110.00

Extension Fee Due With This Request \$110.00

3. Fee for Claims

The fee for additional claims [(37 CFR 1.16(b)-(d)] has been calculated as shown below:

+		est No	T				
Claims Remaining After Amendment	Highest No. Previously Paid For		Present Extra	Rate	Additional Fee	Rate	Additional Fee
7	MINUS	12	= 0	X 9=	\$	X18=	\$0.00
1	MINUS	3	= 0	X44=	\$	X88=	\$0.00
First Presentation of Multiple Dependent Claim		+150=	\$	+300=	\$		
TOTAL ADDITIONAL FEE			\$	OR	\$0.00		
	7 1 on of Multi	7 MINUS 1 MINUS on of Multiple Depender	7 MINUS 12 1 MINUS 3 on of Multiple Dependent Claim	7 MINUS 12 = 0 1 MINUS 3 = 0 on of Multiple Dependent Claim	7 MINUS 12 = 0 X 9= 1 MINUS 3 = 0 X44= on of Multiple Dependent Claim +150=	7 MINUS 12 = 0 X 9= \$ 1 MINUS 3 = 0 X44= \$ on of Multiple Dependent Claim +150= \$	7 MINUS 12 = 0 X 9= \$ X18= 1 MINUS 3 = 0 X44= \$ X88= on of Multiple Dependent Claim +150= \$ +300=

4. Method of Payment of Fees

\boxtimes	Attached is a check in the amount of:	\$110.00
	Charge Deposit Account No. 50-2455 in the amount of:	\$

5. Deposit Account and Refund Authorization

A copy of this Transmittal is enclosed.

The Commissioner is hereby authorized to charge any deficiency in the amount enclosed or any additional fees which may be required during the pendency of this application under 37 CFR 1.16 or 1.17 to Deposit Account No. 50-2455. A copy of this Transmittal is enclosed.

Please refund any overpayment to Hanley, Flight & Zimmerman, LLC at the address below.

Respectfully submitted,

HANLEY, FLIGHT & ZIMMERMAN, LLC 20 North Wacker Drive Suite 4220

Chicago/Illinois 60606

(312) 5/80-1020

By:

Jarnes A. Flight

Registration No.: 37,622

December 6, 2004